

SPECIFICATION CHANGE NOTICE (SCN)				1. DATE (YYMMDD)	FORM APPROVED OMB No. 0704-0188
Public reporting burden for this collection of information is estimated to average 2 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any aspect of this collection of information, including suggestions for reducing this burden, to Department of defense, Washington Headquarters Services, Directorate for Information Operations and Reports, 1215 Jefferson Davis Highway, Suite 1204, Arlington, VA 22202-4302, and to the Management and Budget, Paperwork Reduction Project (0704-0188), Washington, DC 20503. PLEASE DO NOT RETURN YOUR COMPLETED FORM TO EITHER OF THESE ADDRESSES. RETURN COMPLETED FORM TO THE GOVERNMENT ISSUING CONTRACTING OFFICER FOR THE CONTRACT/PROCURING ACTIVITY NUMBER LISTED IN ITEM 2 OF THIS FORM.				2. PROCURING ACTIVITY NO.	
				3. DODAAC	
4. ORIGINATOR			5. SCN TYPE <input type="checkbox"/> PROPOSED <input type="checkbox"/> APPROVED		
a. TYPED NAME (First, Middle Initial, Last)			6. CAGE CODE		7. SPEC. NO.
b. ADDRESS (Street, City, State, Zip Code)			8. CAGE CODE		9. SCN NO.
10. SYSTEM DESIGNATION	11. RELATED ECP NO.	12. CONTRACT NO.	13. CONTRACTUAL AUTHORIZATION		
14. CONFIGURATION ITEM NOMENCLATURE					15. EFFECTIVITY
This notice informs recipients that the specification identified by the number (and revision letter) shown in Item 7 has been changed. The pages changed by this SCN are those furnished herewith and carry the approval date of the related ECP listed in Item 11. The pages of the page numbers and dates listed in Items 16 and 17, combined with non-listed pages of the original issue of the revision shown in Item 7, constitute the current approved version of this specification.					
16. PAGES AFFECTED BY THIS SCN			TYPE OF CHANGE*		APPROVAL DATE (YYMMDD)
PAGE(S) a.			b.		c.
17. SUMMARY OF PREVIOUSLY CHANGED PAGES			DATE SUBMITTED (YYMMDD)	TYPE OF CHANGE*	APPROVAL DATE (YYMMDD)
SCN NO.	RELATED ECP NO.		PAGE(S)		
a.	b.	c.	d.	e.	f.
* "S" indicates earlier page. "A" indicates added page. "D" indicates deletion.					
18.a. GOVERNMENT ACTIVITY			c. SIGNATURE		d. DATE SIGNED (YYMMDD)
b. TYPED NAME (First, Middle Initial, Last)					

Previous editions are obsolete

[illegible]